

Greetings -

I am the mother of three children and a practicing Certified Health Educator. I've been in the healthcare industry for more than 30 years and informing you of my strong OPPOSITION to HB-6423 and SB568. I feel compelled to share that even though I was born and raised in CT and continue to enjoy spending time with the majority of my family who all live here, I will move out of CT immediately upon the passing of these horrible bills.

First and foremost, please know I consider myself pro-SAFE vaccine. All three of my children received the required vaccinations over their lifetime, but sadly, some health issues arose that I simply cannot otherwise explain or ignore. I will forever regret blindly trusting my pediatrician and not doing the due diligence of independently researching the risk vs. benefits of vaccines. I am on a mission to properly educate others so they do not have remorse...or worse, end up with an injured (or killed) child of their own.

I've also personally witnessed the awful impact an adverse event (Guillain Barré Syndrome) had on the daughter of a dear CT friend – tragically, she almost died. It was well-documented that the reaction was directly related to the flu shot (confirmed by Yale) which cost her not only physical and mental issues, but her academic aspirations were shattered when she became too sick to attend school for many days in the latter part of her senior year...it is heartbreaking to know that she was poised to be Valedictorian of her class. Most unfortunately, the injury and time off proved to be too much and she lost her class ranking. This also affected her scholarship award to her college of choice, and it became necessary to take a gap year to gain her strength and health. Three years later, she's doing better, but she has not fully recovered. She may never be.

It's important to also mention that this family is currently pursuing a lawsuit through the vaccine injury court...3 years and counting. It is not only an extremely difficult process, it is also emotionally draining. You may know that regardless of her life-long expenses as well as the pain and suffering, there is a cap of \$250,000 per case. Consider what that means for those who manage exorbitant medical expenses once an injury (or death) happens.

Here are the key factors I am most concerned with:

- We live in the Constitution State. Our civil liberties, medical and religious rights and freedoms are at risk:
 - o Text of Section 20: No person shall be denied the equal protection of the law nor be subjected to segregation or discrimination in the exercise or enjoyment of his or her civil or political rights because of religion, race, color, ancestry, national origin, sex or physical or mental disability.
- As the risks clearly labeled on every vaccine insert state that DEATH is a possibility; therefore, all citizens MUST have choice.
- Vaccine inserts include the following language (under risk factors): "has not been evaluated for carcinogenic or mutagenic potential, or potential to impair fertility." This should be a GREAT concern for all of us.

- The Supreme Court confirms that vaccines are unavoidably unsafe, so where there is risk, there must be choice.
 - There have been NO double blind placebo studies performed comparing vaccinated to unvaccinated.
 - There are NO safety studies available (not one!) in the 35 years since the 1986 law was passed holding pharmaceutical companies harmless even though the law requires it.
 - Many doctors and scientists who testified at the 2019 public hearing (HB5044) reported the need for additional safety studies and precision medicine (individualized, not one size fits all).
- From the latest research, many postulate there are specific genetic variations which may influence how/when a person is injured. Is this important point going to simply be ignored by the PHC...the very people who should be razor focused on keeping up with the advances in science and have our best interest at the center of their decisions. This is particularly important when it comes to a proposal to MANDATE medical treatment and procedures.

Here are some additional questions/concerns I have:

- We are in the middle of the most devastating time in our lifetimes. The pandemic has not only hurt families financially, mentally and spiritually, so I ask – why does the PHC believe this would be an appropriate time to move forward with this controversial bill? It was quite obvious to all of us, based on the unprecedented turnout for the 2020 public hearing, that this is an important topic and as such, this should be postponed, if not completely cancelled. If the PHC cared about the health and wellbeing of their constituents, this would not be on the table.
- The religious exemption has been in place for more than 60 years in CT. I'm in my 50s and I do not recall any outbreak of a communicable disease in my lifetime. Where is the emergency?
- There are only 3 states in the US that removed the religious exemption (and 2 others never had it). It is widely reported that they've received a major backlash over these decisions. In fact, superintendents publicly shared their disappointment and remorse for not doing more to protect the families of these children. I have copies of testimonials for anyone interested.
- In our neighboring state of NY, there were over 20K children in effect “kicked” out of school when the exemption was removed. There was also a mass exodus of families and many moved to CT...and now these families face another difficult decision to move elsewhere should these bills pass in our state.

Please review the following Association of American Physicians and Surgeons letter to the Oversight and Investigations Subcommittee on their position on Federal Vaccine Mandates which I found enlightening:

<https://aapsonline.org/measles-outbreak-and-federal-vaccine-mandates/>

Here are some direct quotes:

"A public health threat is the rationale for the policy on mandatory vaccines. But how much of a threat is required to justify forcing people to accept government-imposed risks? Regulators may intervene to protect the public against a one-in-one million risk of a threat such as cancer from

an involuntary exposure to a toxin, or-one-in 100,000 risk from a voluntary (e.g. occupational) exposure. What is the risk of death, cancer, or crippling complication from a vaccine? There are no rigorous safety studies of sufficient power to rule out a much higher risk of complications, even one in 10,000, for vaccines. Such studies would require an adequate number of subjects, a long duration (years, not days), an unvaccinated control group ("placebo" must be truly inactive such as saline, not the adjuvant or everything-but-the-intended-antigen), and consideration of all adverse health events (including neurodevelopment disorders).

Vaccines are necessarily risky, as recognized by the U.S. Supreme Court and by Congress. The Vaccine Injury Compensation Program has paid some \$4 billion in damages, and high hurdles must be surmounted to collect compensation. The damage may be so devastating that most people would prefer restored function to a multimillion-dollar damage award."

"Mandate advocates often assert a need for a 95% immunization rate to achieve herd immunity. However, Mary Holland and Chase Zachary of NYU School of Law argue, in the Oregon Law Review, that because complete herd immunity and measles eradication are unachievable, the better goal is for herd effect and disease control. The best outcome would result, they argue, from informed consent, more open communication, and market-based approaches.

Even disregarding adverse vaccine effects, the results of near-universal vaccination have not been completely positive. Measles, when it does occur, is four to five times worse than in pre-vaccination times, according to Lancet Infectious Diseases, because of the changed age distribution: more adults, whose vaccine-based immunity waned, and more infants, who no longer receive passive immunity from their naturally immune mother to protect them during their most vulnerable period."

I am also sharing the following attachment to support my third bullet above. It is an admission by the National Institute of Health and the Health Resources & Services Administration - to summarize and drive this point home, there have been no safety testing completed since the law was enacted in 1986.

Thank you very much for your consideration and attention to this urgent and serious matter. I hope that, after a review of this information, the representatives of our Constitution State will do the right thing and keep ALL of the students in school next year by supporting equal rights, medical freedoms, parental rights, and religious freedoms for all students in our state.

Regards,

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